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Effective on 12/08/2004.	Complete if Known								
pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/799,794),794						
f fee transmittal	Filing Date	March 11, 2004	ch 11, 2004						
For FY 2005	First Named Inventor	David L. Dickerson							
The Ward Alaine amell and the status. Soc 37 CED 1 27	Examiner Name	Anh D. Mai							
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2814							
TOTAL AMOUNT OF PAYMENT (\$)	Attorney Docket No.	MI22-2500							
METHOD OF PAYMENT (check all that apply)	METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Non	Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 23-0925	Deposit Account Na	ame: Wells St. John	P.S.						
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under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card inf	orean any ov		de credit card						
information and authorization on PTO-2038.	Officiation should not 55		de di dan dan d						
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEAR Small Entity	CH FEES EXAN Small Entity	MINATION FEES Small Entity							
Application Type Fee (\$) Fee (\$)	Fee (\$) Fee	(\$) Fee (\$)	Fees Paid (\$)						
Utility 300 150 500	250 200	0 100	0.00						
Design 200 100 100	50 130	0 65	0.00						
Plant 200 100 300	150 166	0 80	0.00						
Reissue 300 150 500	250 600	300	0						
Provisional 200 100 0	0	0 0	0.00						
2. EXCESS CLAIM FEES Fee Description		Fee (\$)	nall Entity Fee (\$)						
Each claim over 20 (including Reissues)		50	25						
 Each independent claim over 3 (including Reissues) Multiple dependent claims 		200 360	100 180						
	Paid (\$)	Multiple Deper							
' 26 - 20 or HP = 5 x 50 = 2		Fee (\$)	Fee Paid (\$)						
HP = highest number of total claims paid for, if greater than 20.	מין (פּוֹ	0.00	0.00						
	<u>: Paid (\$)</u> 0.00								
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 0 - 100 = 0 / 50 = 0 (round up to a whole number) x 0.00 = 0.00									
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)									
Other (e.g., late filing surcharge):									
SUBMITTED BY									
Signature Machine	Registration No.	Telephone 5	09-624-4276						

Signature

Registration No. (Attorney/Agent)

Pare (Print/Type) D. Brent Kenady

Registration No. (Attorney/Agent)

Date 5-16-05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, includiring gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If is to

- 20		THE HALL	Application Number	10/799,794		unless it displays a valid OMB control number
APPEN	TRANSMITTAL		Filing Date	March 11,	2004	
	FORM		First Named Inventor	David L. Di	ckerson	
			Art Unit	2814		
(to	be used for all correspondence after initial	filina)	Examiner Name	Anh D. Ma	i	
		14	Attorney Docket Number	MI22-2500		
		ENCI	LOSURES (Check all	that apply)	
	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CE	Address		After Allowance Communication to To Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): -PTO Return Receipt Postcard -Check #146503 in the amount of \$250.00 -Express Mailing Declaration
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remar Custome			<u> </u>	

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Application Serial No. 10/799,794
CResponse to February 14, 2005 Office Action

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No	10/799,794
Filing Date	March 11, 2004
Inventor	
Assignee	Micron Technology, Inc.
Group Art Unit	
Examiner	Anh D. Mai
Attorney's Docket No	
Customer No	021567

Title: Isolation Region Forming Methods

RESPONSE TO FEBRUARY 14, 2005 OFFICE ACTION

To:

Mail Stop Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From:

D. Brent Kenady

Tel. 509-624-4276; Fax 509-838-3424

Wells St. John P.S.

601 W. First Avenue, Suite 1300 Spokane, WA 99201-3817

Responsive to the Office Action dated February 14, 2005, Applicant amends and remarks as follows:

AMENDMENTS

Underlines indicate insertions and strikeouts indicate deletions.

05/18/2005 SMINASS1 00000078 10799794

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